#### U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

317

## **ELEVATION CERTIFICATE**

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

	SE	CTION A	- PROPERTY I	NFORMA	TION	FOR INSURANCE COMPANY USE
Policy Number:					The state of the s	
A2. Building Street Address (including SURF STREET (VACANT LAND)	Apt., Unit, Suite, and/	or Bldg. No.	) or P.O. Route a	nd Box No		Company NAIC Number:
City WAVELAND	lx.			Code 39	576	
A3. Property Description (Lot and Bloc LOTS 21 AND 22, BLOCK 9, WAVELA	ck Numbers, Tax Parce ND PARK SUBDIVISION	el Number, L ON,	_egal Description,	etc.)		
<ul> <li>A4. Building Use (e.g., Residential, No.</li> <li>A5. Latitude/Longitude: Lat. 30-16-42.</li> <li>A6. Attach at least 2 photographs of the transport of transport of the transport of transport of the transport of transport</li></ul>	4 Long89-22-59.1 Fire building if the Certifical renclosure(s): for enclosure(s) enings in the crawlspace above adjacent grade s in A8.b	Horizontal D cate is being N/A ce N/A N/A	Patum: NAD 1 g used to obtain flo A9. sq ft sq in	927 Nood insura  For a bu a) Squa b) Num within c) Total d) Engi	nce.  ilding with an atta are footage of atta ber of permanent n 1.0 foot above a net area of flood neered flood oper	ched garage $N/A$ sq ft flood openings in the attached garag djacent grade $N/A$ openings in A9.b $N/A$ sq in inings? $\square$ Yes $\square$ No
S	ECTION B - FLOOI	DINSURA	NCE RATE MA	P (FIRM)	INFORMATIO	N
B1. NFIP Community Name & Commur WAVELAND 285262	ity Number	B2. Cour HANCO	nty Name CK			B3. State MS
B4. Map/Panel Number 28045C0344 B5. Suffi	10/16/09		B7. FIRM Pand Effective/Revised 10/16/09	Date	B8. Flood Zone(s) AE	B9. Base Flood Elevation(s) (Zon AO, use base flood depth)
B10. Indicate the source of the Base Flo  ☐ FIS Profile ☐ FIRM  B11. Indicate elevation datum used for E  B12. Is the building located in a Coastal Designation Date:	☐ Community De SFE in Item B9: ☐ NG	termined VD 1929	☐ Other/S ☐ NAVD 1 ) area or Otherwis	ource: 988		☐ Yes
SEC.	TION C – BUILDING	ELEVAT	ION INFORMAT	TION (SU	RVEY REQUIR	ED)
<ul> <li>C1. Building elevations are based on:         <ul> <li>*A new Elevation Certificate will be reference</li> </ul> </li> <li>C2. Elevations – Zones A1–A30, AE, AH below according to the building diaground Benchmark Utilized: SLV11,1970 Indicate elevation datum used for the Datum used for building elevations metals.</li> </ul>	Construction D equired when construct , A (with BFE), VE, V1- am specified in Item A7	rawings* ion of the bi -V30, V (wit 7. In Puerto Vertical	☐ Building uilding is complete th BFE), AR, AR/A Rico only, enter n ☐ Datum:	g Under C e. A, AR/AE, / neters.	onstruction* AR/A1–A30, AR/A	Finished Construction  a.H, AR/AO. Complete Items C2.a-h
					Check	the measurement used.
<ul> <li>a) Top of bottom floor (including base</li> <li>b) Top of the next higher floor</li> <li>c) Bottom of the lowest horizontal structure</li> <li>d) Attached garage (top of slab)</li> <li>e) Lowest elevation of machinery or e (Describe type of equipment and lof)</li> <li>f) Lowest adjacent (finished) grade not</li> </ul>	uctural member (V Zono quipment servicing the cation in Comments)	es only)	oor)	20.0 N/A . N/A . N/A . N/A.		☑ feet         ☐ meters           ☑ feet         ☐ meters           ☑ feet         ☐ meters           ☑ feet         ☐ meters           ☑ feet         ☐ meters
g) Highest adjacent (finished) grade n h) Lowest adjacent grade at lowest ele	ext to building (HAG)	- to a company		<u>14.4</u> <u>15.2</u>		☐ feet ☐ meters ☐ meters
						feet meters
This certification is to be signed and seale	TION D - SURVEYO	R, ENGIN	EER, OR ARCH	HITECT (	ERTIFICATION	1
This certification is to be signed and seals information. I certify that the information of I understand that any false statement may Check here if comments are provided Check here if attachments.	/ be punishable by fine	or imprisor Were latitu		oret the da .S. Code, .	ta available. Section 1001.	P. CHINGS PROFES C. PLASS P. ENGINEER L.
Certifier's Name JASON P. CHINICHE			License Nur		. 19732	HERE
Title PROJECT MANAGER	Company Name		CHINICHE, PA, IN	1C.		101
Address 412 HWY. 90, SUITE 11	City BAY ST. LOU	JIS	State MS	ZIP Cod	le 39520	19732
Signature mon churche	Date 11/13/15		Telephone	(228) 467	-6755	OF MISSIS

IMPORTANT: In these spaces, copy the	corresponding information fro	n Section A	200	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, So SURF STREET (VACANT LAND)	uite, and/or Bldg. No.) or P.O. Route a	nd Box No.		Policy Number:
City WAVELAND	State MS	ZIP Code 3	9576	Company NAIC Number:
SECTION D - SU	RVEYOR, ENGINEER, OR ARCH	ITECT CER	TIFICATION (CC	ONTINUED)
Copy both sides of this Elevation Certificate for	(1) community official, (2) insurance a	gent/company,	and (3) building or	wner.
Comments NOTE:THE DESCRIPTION IN A FIGURE BASE FLOOD ELEVATION (BFE) IS PERFLOOD ZONE IS DETERMINED BY GRAPHIC The City of Waveland requires a 1' freeboard. C	PLOTTING, TBM (TEMPORARY BEI	VERIFICATION (NOTE   NOTE   NO	ON OF (BFE) BY L	OCAL BUILDING OFFICIAL. THE
Signature Yaron Chircle	Date	11/13/15		
SECTION E - BUILDING ELEVATION	INFORMATION (SURVEY NOT	REQUIRED)	FOR ZONE AO	AND ZONE A (WITHOUT BFE
For Zones AO and A (without BFE), complete It and C. For Items E1–E4, use natural grade, if a E1. Provide elevation information for the follow grade (HAG) and the lowest adjacent grade a) Top of bottom floor (including basement b) Top of bottom floor (including basement b) Top of bottom floor (including basement b) Top of bottom floor (including basement clevation C2.b in the diagrams) of the butan Attached garage (top of slab) is  Top of platform of machinery and/or equip grades and considered and cons	Ivailable. Check the measurement use wing and check the appropriate boxes de (LAG). It, crawlspace, or enclosure) is It, crawlspace, or enclosure) is It flood openings provided in Section A ilding is \( \times \) feet \( \times \) meters \( \times \) about ment servicing the building is Is available, is the top of the bottom floor	d. In Puerto Ri to show wheth	co only, enter meter er the elevation is a feet  meters feet meters feet meters feet feet meters feet feet feet feet feet feet feet fee	ers. above or below the highest adjacen  above or □ below the HAG.  above or □ below the LAG.  of Instructions), the next higher flo  HAG.  ove or □ below the HAG.
	OPERTY OWNER (OR OWNER'S		The state of the s	FICATION
The property owner or owner's authorized represor Zone AO must sign here. The statements in Seroperty Owner's or Owner's Authorized Represor	Sections A, B, and E are correct to the	s, and E for Zo best of my kno	ne A (without a FE wledge.	MA-issued or community-issued BF
ddress	City		State	ZIP Code
ignature	Date		Telepho	one
omments				
				Check here if attachm
e local official who is authorized by law or ordinal	ECTION G - COMMUNITY INFOR			complete Sections A. D. O. ( 5)
his Elevation Certificate. Complete the applicable	e item(s) and sign below. Check the me	asurement use	ed in Items G8-G10	). In Puerto Rico only, enter meters.
<ul> <li>The information in Section C was taken is authorized by law to certify elevation i</li> </ul>	from other documentation that has be	en signed and	sealed by a license	ed surveyor, engineer, or architect v
A community official completed Section				
☐ The following information (Items G4–G1				
	te Permit Issued	G6. Date	Certificate Of Comp	pliance/Occupancy Issued
4. Permit Number G5. Da	98 W/95 97		Certificate Of Com	pliance/Occupancy Issued
4. Permit Number G5. Da  This permit has been issued for: New	te Permit Issued			pliance/Occupancy Issued  Datum
4. Permit Number G5. Da  This permit has been issued for: Never Elevation of as-built lowest floor (including base).  BFE or (in Zone AO) depth of flooding at the	te Permit Issued  w Construction	provement	meters	
4. Permit Number  G5. Da  This permit has been issued for: Never Elevation of as-built lowest floor (including base) BFE or (in Zone AO) depth of flooding at the	te Permit Issued  w Construction	provement	meters	Datum
This permit has been issued for: New Elevation of as-built lowest floor (including bath BFE or (in Zone AO) depth of flooding at the community's design flood elevation:	te Permit Issued  w Construction	provement feet	☐ meters	Datum
4. Permit Number G5. Da  This permit has been issued for: New Elevation of as-built lowest floor (including bath BFE or (in Zone AO) depth of flooding at the community's design flood elevation:	te Permit Issued  v Construction	provement feet	☐ meters	Datum
4. Permit Number G5. Da	te Permit Issued  v Construction	provement feet feet feet	☐ meters	Datum

# U.S. DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008 Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1-9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

SECTION A - PROPERTY INFORMATION					FOR INSU	JRANCE COMPANY USE	
FLEMMING	2010 011					Policy Nur	
DOX NO.	<ul><li>A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.</li><li>317 SURF STREET</li></ul>						NAIC Number:
City WAVELAND	AVELAND Mississippi 39576						
A3. Property Des LOTS 21 AND 22,	cription (Lot a BLOCK 9, V	and Block Numbers, Ta VAVELAND PARK SUE	x Parc	el Number, Legal D ION,	escription, etc.)		
		ntial, Non-Residential,					
A5. Latitude/Long	itude: Lat. 3	0-16-42.4	Long.	-89-22-59.1	Horizontal Datum	ı: NAD	1927 × NAD 1983
A6. Attach at leas	t 2 photograp	ohs of the building if the	: Certifi	cate is being used t			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
A7. Building Diagr							
		space or enclosure(s):					
		Ispace or enclosure(s)	_	0 sq ft			
b) Number of	permanent flo	ood openings in the cra	awlspac	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	rade 0
		penings in A8.b	_	sq in			
d) Engineered	I flood openin	ngs? 🗌 Yes 🗵 No	0				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached (	garage within 1.0 fo	ot above adiacent or	rade	0
		penings in A9.b			ar and the day account gr		
		gs? ☐ Yes ☒ No					
[H	•		,				
	SE	CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	ION	
B1. NFIP Communi WAVELAND 28526		ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	Ef	IRM Panel ffective/ evised Date	B8. Flood Zone(s)	(Zor	se Flood Elevation(s) ne AO, use Base
28045C0344	D	10/16/2009	10/16		AE	19	od Depth)
B10. Indicate the so	ource of the E	Base Flood Elevation (E	3FE) da	ata or base flood de	enth entered in Item F	30.	
☐ FIS Profile	⊠ FIRM [	Community Determi	ned [	Other/Source:	par oncored in item E		
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ No	GVD 1929 🗵 NA	VD 1988  Othe	er/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protect	ted Area (C	PA)? Tyes V No
Designation D				□ OPA		(0	,
							I

IMPORTANT: In these spaces, copy the corresponding	ng information from S	Section A.	FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/ 317 SURF STREET	Policy Number:		
\A/A\/C  AND		IP Code 9576	Company NAIC Number
SECTION C - BUILDING E	LEVATION INFORM	ATION (SURVEY RE	EQUIRED)
	ion Drawings*	uilding Under Constru Iding is complete. BFE), AR, AR/A, AR/, d in Item A7. In Puerto m: NAVD 1988 elow.	AE ABOAL ASS ABOAL ABOA
SECTION D – SURVEYOR	ENGINEER, OR AR	CHITECT CERTIFIC	CATION
This certification is to be signed and sealed by a land su I certify that the information on this Certificate represents statement may be punishable by fine or imprisonment ur Were latitude and longitude in Section A provided by a lic Certifier's Name	rveyor, engineer, or ar s my best efforts to inte oder 18 U.S. Code, Se	chitect authorized by I erpret the data availab ction 1001.	
JASON P. CHINICHE  Title PROJECT MANAGER  Company Name JAMES J. CHINICHE, PA, INC.  Address 412 HWY. 90, SUITE 2	P.E. 19732		SON P. CALLED AND CALL
City BAY ST. LOUIS	State Mississippi	ZIP Code 39520	Q:MISSISSIFF!
Signature  Copy all pages of this Flevation Certificate and all attachments	Date 11/01/2016	Telephone (228) 467-6755	
Copy all pages of this Elevation Certificate and all attachments (including type of equipment and location, per NOTE: The description in A3. above is for information only map in section B4. Recommend verification of (BFE) by location of the control of the contr	C2(e), if applicable)  / & not to certify the bucal building official. The	uilding location. The B	ase Flood Elevaton (BFE) is per

#### U.S. DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency National Flood Insurance Program

OMB No. 1660-0008

Expiration Date: November 30, 2018

# **ELEVATION CERTIFICATE**

Important: Follow the instructions on pages 1–9.

Copy all pages of this Elevation Certificate and all attachments for (1) community official, (2) insurance agent/company, and (3) building owner.

		CTION A - PROPERTY	' INFO	RMATION		FOR INSU	JRANCE COMPANY USE
A1. Building Owner's Name  FLEMMING #2016-371  Policy Number:							
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Company NAIC Number: 317 SURF STREET						NAIC Number:	
City WAVELAND	ZIF Code						
A3. Property Des LOTS 21 AND 22,	cription (Lot a BLOCK 9, W	and Block Numbers, Ta VAVELAND PARK SUE	x Parc	el Number, Legal D ON,	escription, etc.)		
A4. Building Use	(e.g., Resider	ntial, Non-Residential, /	Additio	n, Accessory, etc.)	Residential		
A5. Latitude/Longitude: Lat. 30-16-42.4 Long89-22-59.1 Horizontal Datum: NAD 1927 X NAD 198.							1927 🕅 NAD 1983
A6. Attach at leas	t 2 photograp	ohs of the building if the	Certifi	cate is being used t			Sector transport of the section of t
A7. Building Diagr	am Number	5					
A8. For a building	with a crawls	space or enclosure(s):					
		Ispace or enclosure(s)		0 sq ft			
b) Number of	permanent fl	ood openings in the cra	wlspad	ce or enclosure(s) w	vithin 1.0 foot above	adjacent gr	rade 0
c) Total net ar	rea of flood o	penings in A8.b	) :	sq in			
d) Engineered	d flood openin	ngs? ☐ Yes ☒ No	0				
A9. For a building	with an attach	ned garage:					
a) Square foo	tage of attach	ned garage0		sq ft			
b) Number of	permanent flo	ood openings in the atta	ached g	garage within 1.0 fo	ot above adiacent o	rade	0
		penings in A9.b			augusein gi		
		gs? ☐ Yes ☒ No					
		CTION B - FLOOD IN	ISURA	NCE RATE MAP	(FIRM) INFORMAT	TION	
B1. NFIP Communi WAVELAND 28526		ommunity Number		B2. County Name HANCOCK			B3. State Mississippi
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date		IRM Panel fective/	B8. Flood Zone(s)	B9. Bas	e Flood Elevation(s) ne AO, use Base
28045C0344	D	10/16/2009	10/16	evised Date /2009	AE	Floo 19	od Depth)
		Base Flood Elevation (E			pth entered in Item I	39:	
☐ FIS Profile	X FIRM [	Community Determi	ned [	Other/Source: _			
B11. Indicate eleva	tion datum us	sed for BFE in Item B9:	□ N	GVD 1929 🗵 NA	VD 1988 🔲 Othe	er/Source: _	
B12. Is the building	located in a	Coastal Barrier Resour	ces Sy	stem (CBRS) area	or Otherwise Protec	ted Area (C	PA)? ☐ Yes ☒ No
Designation D				□ ОРА		<b>\</b>	
-144	/= / / = ·						

IMPORTANT: In these spaces, copy the corresponding information from Section A. FOR INSURANCE COM				
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. R 317 SURF STREET	Policy Number:			
The state of the s	IP Code 9576	Company NAIC Number		
SECTION C - BUILDING ELEVATION INFORM	ATION (SURVEY RI	EQUIRED)		
C1. Building elevations are based on: Construction Drawings* B *A new Elevation Certificate will be required when construction of the buil C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with Complete Items C2.a–h below according to the building diagram specifie	uilding Under Construiding is complete. BFE), AR, AR/A, AR/ d in Item A7. In Puert m: NAVD 1988 elow.	uction*		
g) Highest adjacent (finished) grade next to building (HAG)	15. 4	X feet  meters		
h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support	15. 3	X feet		
SECTION D – SURVEYOR, ENGINEER, OR A	RCHITECT CERTIFI	CATION		
This certification is to be signed and sealed by a land surveyor, engineer, or a I certify that the information on this Certificate represents my best efforts to int statement may be punishable by fine or imprisonment under 18 U.S. Code, Se Were latitude and longitude in Section A provided by a licensed land surveyor Certifier's Name  License Number	erpret the data availa ection 1001. —	law to certify elevation information.  ble. I understand that any false  Check here if attachments.		
JASON P. CHINICHE P.E. 19732				
Title PROJECT MANAGER  Company Name JAMES J. CHINICHE, PA, INC.  Address 412 HWY. 90, SUITE 2  City BAY ST. LOUIS  State Mississippi  Signature  Date	ZIP Code 39520 Telephone	STATE OF MISSISSIPPI		
REV 12/29/2016	(228) 467-6755			
Comments (including type of equipment and location, per C2(e), if applicable) NOTE: The description in A3. above is for information only & not to certify the map in section B4. Recommend verification of (BFE) by local building official. Owner is responsible for coordinating this certificate with Contractor and/or Building C2.e) Equipment is an A/C condenser on wall bracket.	ouilding location. The	Base Flood Elevaton (BFE) is per		

IMPORTANT: In these spaces, copy the correspon			FOR INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, a 317 SURF STREET	nd/or Bldg. No.) or P.O	. Route and Box No.	Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number
SECTION E – BUILDING E FOR ZOI	LEVATION INFORMA NE AO AND ZONE A	ATION (SURVEY NOT (WITHOUT BFE)	REQUIRED)
For Zones AO and A (without BFE), complete Items E complete Sections A, B,and C. For Items E1–E4, use enter meters.	E1–E5. If the Certificate natural grade, if availal	is intended to support a ole. Check the measure	LOMA or LOMR-F request, ment used. In Puerto Rico only,
E1. Provide elevation information for the following an the highest adjacent grade (HAG) and the lowest a) Top of bottom floor (including basement,	d check the appropriate adjacent grade (LAG).	e boxes to show whethe	r the elevation is above or below
crawlspace, or enclosure) is b) Top of bottom floor (including basement.		X feet    meter	s above or below the HAG.
crawlspace, or enclosure) is  E2. For Building Diagrams 6–9 with permanent flood the port higher floor (elevation C2 high	oponings provided in C	X feet meter	
the next higher floor (elevation C2.b in the diagrams) of the building is	———— . ———	ection A items 8 and/or  ⊠ feet ☐ meter	A
E3. Attached garage (top of slab) is		X feet meter	
E4. Top of platform of machinery and/or equipment servicing the building is	. ;	X feet meter	
E5. Zone AO only: If no flood depth number is available floodplain management ordinance? Yes	ole, is the top of the bottom.  No Unknown.	om floor elevated in acc The local official must o	cordance with the community's sertify this information in Section G.
SECTION F - PROPERTY OW	NER (OR OWNER'S R	EPRESENTATIVE) CE	RTIFICATION
The property owner or owner's authorized representat community-issued BFE) or Zone AO must sign here. T	ive who completes Sec he statements in Section	tions A, B, and E for Zoi ons A, B, and E are corr	ne A (without a FEMA-issued or ect to the best of my knowledge
Property Owner or Owner's Authorized Representative			
Address	City	Sta	te ZIP Code
Signature	Date	Tel	ephone
Comments			
			9 pc
			Check here if attachments.

IMPORTANT: In these spaces, copy the corres	ponding information f	rom Section A.	FOR INSURANCE COMPANY USE			
Building Street Address (including Apt., Unit, Suit 317 SURF STREET	No. Policy Number:					
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number			
SECTION	G - COMMUNITY INFO	ORMATION (OPTIO	NAL)			
The local official who is authorized by law or ording Sections A, B, C (or E), and G of this Elevation C used in Items G8–G10. In Puerto Rico only, enter	ertificate Complete the	community's floodpla applicable item(s) ar	ain management ordinance can complete and sign below. Check the measurement			
G1. The information in Section C was taken engineer, or architect who is authorized data in the Comments area below.)	from other documentati by law to certify elevati	ion that has been sig on information. (Indic	gned and sealed by a licensed surveyor, cate the source and date of the elevation			
G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.						
G3. The following information (Items G4–G1	10) is provided for comm	านnity floodplain man	agement purposes.			
G4. Permit Number	65. Date Permit Issued		G6. Date Certificate of Compliance/Occupancy Issued			
G7. This permit has been issued for:	lew Construction  Su	bstantial Improveme	nt			
G8. Elevation of as-built lowest floor (including ba of the building:	asement)	□	feet meters Datum			
G9. BFE or (in Zone AO) depth of flooding at the	building site:	□	feet meters Datum			
G10. Community's design flood elevation:		□	feet meters Datum			
Local Official's Name	Tit	ile				
Community Name	Те	elephone				
Signature	Da	ite				
Comments (including type of equipment and location	on, per C2(e), if applicat	ole)				
		,				
			Check here if attachments.			

#### **BUILDING PHOTOGRAPHS**

**ELEVATION CERTIFICATE** 

See Instructions for Item A6.

OMB No. 1660-0008

Expiration Date: November 30, 2018

IMPORTANT: In these spaces, co	FOR INSURANCE COMPANY USE		
Building Street Address (including 317 SURF STREET	Apt., Unit, Suite, and/or Bldg. No.) o	P.O. Route and Box No.	Policy Number:
City WAVELAND	State Mississippi	ZIP Code 39576	Company NAIC Number

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



Photo One

#### Photo One Caption FRONT VIEW 12/02/2016



Photo Two

Photo Two Caption REAR V IEW 12/02/2016

2017 111
Recorded in the Above
Deed Book & Page
01-05-2017 02:31:16 PM
Timothy A Kellar
Hancock County



# NONCONVERSION AGREEMENT with CITY OF WAVELAND, MISSISSIPPI

This D	DECLARATION made this day of, 20, 20, by
WITN	(OWNER) having an address at 321 Surf Street, Wevelady ESSETH:
WHEF	REAS, the Owner is the record owner of all that real property located at
	City of Waveland, MS, in the County of Hancock, designated in the Tax Records as  REAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base
	elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of Waveland
	plain Management Ordinance of Number 342 and under Permit Number 18064.
conditi	REAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, ions and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and tions of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, future owners, ssigns.
UPON	THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:
1.	The structure or part thereof to which these conditions apply is:
2.	At this site, the Base Flood Elevation is feet above mean sea level, National Geodetic Vertical Datum.
3.	Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limited storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.
4.	The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.
5.	The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render the structure uninsurable or increase the cost for flood insurance.
6.	A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.
7.	Other conditions:
	In witness whereof the undersigned set their hands and seals this day of, 20
	And Service
	Thurst the second
	(Seal)
State of Mississippi, Co	
Personally appeared be	fore me, the undersigned
authority in and for the son this day of	Viscol III Control of Extra Control of E
my jurisdiction, the with	
who acknowledged that	executed the
above and foregoing ins	strument. My Commission Expires Dec. 31, 2019

STATE OF MISSISSIPPI COUNTY OF HANCOCK

2006 10408 Recorded in the Above Deed Book & Page 07-19-2006 12:30:10 PM Timothy A Kellar Hancock County

#### WARRANTY DEED

2017 Deed Book & Page

FOR AND IN CONSIDERATION of the sum of TEN DOLLARS (\$10.00) cash in hand paid and other good and valuable considerations, the receipt and sufficiency of all of which is hereby acknowledged, WE, STEPHEN A. LAMO AND KAREN R. LAMO, do hereby sell, convey and warrant unto FENVRICK R. FLEMING AND MEGAN T. FLEMING, as joint tenants with full rights of survivorship and not as tenants in common, the following described property situated in Hancock County, Mississippi, to-wit:

Lot 7 thru 10 and Lots 19 thru 22, Block 9, WAVELAND PARK SUBDIVISION, Town of Waveland, Hancock County, Mississippi, as per map or plat thereof on file in the office of the Chancery Clerk of Hancock County, Mississippi.

THIS CONVEYANCE is subject to any and all recorded restrictive covenants, rights of way, easements and the prior reservations of any oil, gas and other minerals.

IT IS AGREED and understood that the taxes for the current year have been pro-rated as of this date on an estimated basis. When said taxes are actually determined, if the pro-ration as of this date is incorrect, then the Grantor(s) agrees to pay to the Grantee(s), or its assigns, any deficit on an actual pro-ration, and likewise, the Grantee(s) agrees to pay to the Grantor(s), or its assigns, any amount overpaid by it.

Witness the execution HEREOF on this the

# \*\*\* Certified Copy Page \*\*\*

I, Timothy A Kellar, Chancery Clerk, do hereby certify that the foregoing is a FULL, TRUE and CORRECT copy of the Instruments(s) herewith set out as same appears of record in: Deed BOOK - 2006, AT PAGE - 10408 in said court.

Witness my hand and seal this 5 Day of January, 2017.

Timothy A Kellar

Chancery Clerk

Hancock County,

DC:

Hancock County I certify this instrument was filed on 01-05-2017 02:31:16 PM and recorded in Deed Book 2017 at pages 111 - 114

Timothy, A Kellar

Printed: 01-05-2017 02:27:58 PM

Optical file reference: D28A8.7D6